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Bib Data Sheet

SERIAL NUMBER 09/652,730	FILING DATE 08/31/2000 RULE -	CLASS 386	GROUP ART UNIT 2615	ATTORNEY DOCKET NO. K35A0665
APPLICANTS William B. Boyle, Lake Forest, CA ; Tim J. Elliott, Fountain Valley, CA ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/17/2000 -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 30
				INDEPENDENT CLAIMS 3
ADDRESS Western Digital Corporation Milad G Shara Esq 8105 Irvine Center Drive Plaza 3 Irvine ,CA 92618				
TITLE Electronic program guide subsystem for receiving and processing electronic program guide information from a set-top box				
FILING FEE RECEIVED 1000	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

Printed 10/31/2001

APPLICATION NUMBER 09/652,730	FILING DATE 08/31/2000	CLASS 386	GROUP ART UNIT 2615	ATTORNEY DOCKET N K35A0665
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APPLICANT
WILLIAM B BOYLE, LAKE FOREST, CALIFORNIA; TIM J ELLIOTT,
FOUNTAIN VALLEY, CALIFORNIA.

CONTINUING DOMESTIC DATA***
VERIFIED
low *meal*

371 (NAT'L STAGE) DATA***
VERIFIED
low *meal*

FOREIGN APPLICATIONS***
VERIFIED
low *meal*

FOREIGN FILING LICENSE GRANTED 10/17/2000

Foreign priority claimed 35 USC 119 (a-d) conditions met	O yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> O yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWINGS 4	TOTAL CLAIMS 30	INDEPENDE CLAIMS 3
Verified and acknowledged	<i>low</i> Examiner's Name Initials				

ADDRESS
WESTERN DIGITAL CORPORATION
MILAD G SHARA ESQ
8105 IRVINE CENTER DRIVE PLAZA 3
IRVINE , CA 92618

TITLE
ELECTRONIC PROGRAM GUIDE SUBSYSTEM FOR RECEIVING AND PROCESSING ELECTR
ONIC PROGRAM GUIDE INFORMATION FROM A SET-TOP BOX

<p>FILING FEE RECEIVED</p> <p>\$****0</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:</p>	<p><input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of Time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit</p>
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